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EATING DISORDERS AND WOMEN

Each year nearly 5 million Americans, mostly women, are affected with eating disorders that threaten their health. These disorders, anorexia nervosa, bulimia nervosa, and binge-eating, are characterized by a serious disturbance in eating which includes restriction of intake or bingeing, as well as excessive concern about body shape or body weight. Although eating disorders typically occur in adolescent girls or young women, they can occur after 40 years of age and in young children.

Effective treatments are available for these disorders especially when they are treated in their early stages. However, individuals with eating disorders may try to conceal their symptoms because of ignorance of available treatment. DHHS is helping women to overcome their eating disorders and return to healthy lifestyles by researching various treatment modalities. Currently DHHS-supported studies are being conducted to determine if anti-depressant therapy may help those with eating disorders.

1. A COMPARISON OF INPATIENT AND OUTPATIENT WOMEN WITH EATING DISORDERS. White, JH. *Arch Psychiatr Nurs* 12: 181-94, Aug '98.
2. EATING DISORDERS. Becker, AE. *N Engl J Med* 340:1092-8, 8 Apr '99.

N.B. A master copy of each journal article in this Bulletin is available for photocopy at each Library

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3. EATING DISORDERS AND GYNECOLOGY: KNOWLEDGE AND ATTITUDES AMONG CLINICIANS. Morgan, JF. *Acta Obstet Gynecol Scand* 78:233-9, Mar '99.
4. EATING DISTURBANCES IN WHITE AND MINORITY FEMALE DIETERS. le Grange, D. *Int J Eat Disord* 24:395-403, Dec '98.
5. EATING DISORDERS AND THE CULTURAL FORCES BEHIND THE DRIVE FOR THINNESS: ARE AFRICAN AMERICAN WOMEN REALLY PROTECTED. Williamson, L. *Soc Work Health Care* 28 (1):61-73, '98.
6. LONG-TERM OUTCOME FOR BULIMIA NERVOSA. *Arch Gen Psychiatry* 56:63-9, Jan '99.
7. NATURAL COURSE OF A COMMUNITY SAMPLE OF WOMEN WITH BINGE EATING DISORDER. Cachelin, FM. *Int J Eating Disord* 25:45-54, Jan '99.
8. PERSONALITY CHARACTERISTICS OF FEMALES SEEKING TREATMENT FOR OBESITY, BULIMIA NERVOSA AND ALCOHOLIC DISORDERS. Palme, G. *Pers Individual Differences* 26:255-63, Feb '99.
9. THE PREVENTION OF EATING DISORDERS: EMPIRICAL, METHODOLOGICAL, AND CONCEPTUAL CONSIDERATIONS. Franko, DL. *Clin Psychol Sci Prac* 5:459-77, Win '98.
10. RECOGNIZING EATING DISORDERS IN WOMEN. Casper, RC. *Psychopharmacol Bull* 34 (3):267-9, '98.

HORMONE REPLACEMENT THERAPY

Hormone replacement therapy (HRT) is defined as treatment in which estrogen, and often progestin, is taken to relieve the symptoms caused by the low levels of hormones produced by the body. The literature indicates that women who are treated with HRT may experience relief from the symptoms of low estrogen, hot flushes and vaginal dryness. It also prevents osteoporosis and cardiovascular disease. Research indicates that 9% of women 40-60 years of age are using HRT. However, no more than 50-60% of these women will continue to use HRT after 1 year. NCHS is currently researching hormone replacement therapy.

11. AGREEMENT OF SELF-REPORTED USE OF MENOPAUSAL HORMONE REPLACEMENT THERAPY WITH PHYSICIAN REPORTS. Jain, MG. *Epidemiology* 10:260-3, May '99.
12. ARE LONG-TERM HORMONE REPLACEMENT THERAPY USERS DIFFERENT FROM SHORT-TERM AND NEVER USERS? Buist, DSM. *Am J Epidemiol* 149 (3):275-81, '99.
13. OFFICE OF RESEARCH ON WOMEN'S HEALTH SEMINAR SERIES—PART I. Godfrey, J. *J Women's Health* 8 (1):51-7, '99.
14. IMPROVING ADHERENCE TO HORMONE REPLACEMENT THERAPY WITH EFFECTIVE PATIENT-PHYSICIAN COMMUNICATION. Sarrel, PM. *Am J Obstet Gynecol* 180:S337-40, Mar '99.
15. IS THERE AN ASSOCIATION BETWEEN HORMONE REPLACEMENT THERAPY AND BREAST CANCER? Creasman, WT. *J Women's Health* 7 (7):1231-46, '98.
16. LONG TERM EFFECTS OF COMBINED HORMONE REPLACEMENT THERAPY ON MARKERS OF ENDOTHELIAL FUNCTION AND INFLAMMATORY ACTIVITY IN HEALTHY POSTMENOPAUSAL WOMEN. VanBaal, WM. *Fertil Steril* 71:663-70, Apr '99.
17. MEDICAL UNCERTAINTY AND PRACTICE VARIATION GET PERSONAL: WHAT SHOULD I DO ABOUT HORMONE REPLACEMENT THERAPY? Daley, J. *Ann Intern Med* 130:602-4, 6 Apr '99.
18. RACIAL DIFFERENCE IN HORMONE REPLACEMENT THERAPY PRESCRIPTIONS. Marsh, JVR. *Obstet Gynecol* 93:999-1003, June '99.
19. USE OF HORMONE REPLACEMENT THERAPY BY POSTMENOPAUSAL WOMEN IN THE UNITED STATES. Keating, NL. *Ann Intern Med* 130:545-53, Apr '99.
20. USE OF HORMONE REPLACEMENT THERAPY IN WASHINGTON STATE. Saver, BG. *J Fam Prac* 48:364-71, May '99.

HRSA'S AGENDA FOR WOMEN'S HEALTH

To assure that the health care system appropriately addresses the health needs of women, reduces barriers to their health care, and improves the health status of women in underserved and vulnerable populations, HRSA has created an Agenda for Women's Health. This Agenda is based on three priorities: education and training; health services; and research and evaluation. The

literature suggests that the integration of these three disciplines promotes a holistic approach to women's health. Research indicates that linking the physical, psychological, social, cultural and educational needs of women across the life span will improve their health status.

21. BREAST CANCER MORTALITY IN BLACK AND WHITE WOMEN: A HISTORICAL PERSPECTIVE BY MENOPAUSAL STATUS. Flaws, JA. *J Womens Health* 7 (8):1007-15, '98
22. CARDIOVASCULAR DISEASE PREVENTION FOR WOMEN ATTENDING BREAST AND CERVICAL CANCER SCREENING PROGRAMS: THE WISEWOMAN PROJECTS. *Prev Med* 28:496-502, May '99.
23. THE INITIATIVE TO ELIMINATE RACIAL AND ETHNIC HEALTH DISPARITIES IS MOVING FORWARD. Satcher, D. *Public Health Rep* 114:283-7, May-June '99.
24. MEDICAID MANAGED CARE: THE CHALLENGE OF PROVIDING CARE TO LOW-INCOME WOMEN. Gonen, JS. *Womens Health Issues* 9 (Suppl): 57S-67S, Mar-Apr '99.
25. THE PROMISE OF A MULTIPLE ROLES PARADIGM FOR WOMEN'S HEALTH RESEARCH. Repetti, RL. *Women Health: Res Gender Behav Policy* 4:273-80, Win '98.
26. PROMOTING HEALTH, PROMOTING WOMEN: THE CONSTRUCTION OF FEMALE AND PROFESSIONAL IDENTITIES IN THE DISCOURSE OF COMMUNITY HEALTH WORKERS. Ramirez-Vales, J. *Soc Sci Med* 47:1749-62, Dec '98.
27. QUALITY OF CARE FOR WOMEN WHERE ARE WE NOW AND WHERE ARE WE HEADED? McGlynn, EA. *Womens Health Issues* 9:65-80, Mar-Apr '99.
28. A RANDOMIZED, CONTROLLED TRIAL OF A BEHAVIORAL INTERVENTION TO PREVENT SEXUALLY TRANSMITTED DISEASE AMONG MINORITY WOMEN. Shain, RN. *N Engl J Med* 340:93-100, 14 Jan '99.
29. THE SCOPE OF UNMET MATERNAL HEALTH NEEDS IN PEDIATRIC SETTINGS. Kahn, RS. *Pediatrics* 103:576-81, Mar '99.
30. SLIPPING THROUGH THE SAFETY NET. Pearlman, DN. *J Health Care Poor Underserved* 9:217-21, Aug '98.

MEDICAL SAVINGS ACCOUNTS

A medical savings account (MSA) is an alternative form of healthcare coverage. It involves a combination of private, high-deductible, catastrophic health insurance with a savings account from which noncatastrophic medical expenses are paid with pre-tax dollars set aside in tax-favored accounts. The literature indicates that the number of MSAs currently in place is well below the expectations of many MSA advocates. This is true even though MSAs may represent an affordable alternative to traditional health insurance for self-employed individuals or small business owners where obtaining health insurance for themselves as well as their employees can be a major problem. Research indicates that there is an ongoing debate regarding the merits of giving tax preferences to nonelderly individuals and families that establish MSAs in conjunction with high-deductible catastrophic health plans. AHCPR has recently funded research in this area.

31. COVER YOUR HEALTH CARE COSTS WITH A MEDICAL SAVINGS ACCOUNT. Jones, AN. *Northwest Dent* 77:47-8, Jul-Aug '98.
32. MEDICAL SAVINGS ACCOUNTS. Roux, A. *S Afr Med J* 88:1549-50, Dec '98.
33. MEDICAL SAVINGS ACCOUNTS: IT'S DÉJA VU ALL OVER AGAIN. Scott, JS. *Healthc Financ Manage* 52:26-7, Sep '98.
34. MEDICAL SAVINGS ACCOUNTS: MICRO- SIMULATION RESULTS FROM A MODEL WITH ADVERSE SELECTION. Zabinski, D. *J Health Econ* 18:195-218, 1999.
35. MEDICARE+CHOICE: BIG FANFARE, BUT WHERE'S THE PARTY? Pretzer, M. *Med Econ* 75:15-16, 26 Oct '98.
36. MEDICARE+CHOICE: CHALLENGES AND OPPORTUNITIES. Marlowe, JF. *Empl Benefits J* 23:32-43, Dec '98.
37. OH NO, HERE WE GO AGAIN. HEALTH-CARE COSTS ARE SOARING—AND COMPANIES ARE PASSING THE INCREASES ALONG TO THEIR WORKERS. Meyer, M. *Newsweek* 132:46-7, 14 Dec '98.
38. A PLAN PHYSICIANS FIND APPEALING: REDEFINING EMPLOYER CONTRIBUTIONS. Diamond, F. *Manag Care* 7:22-4, 27-9, Oct '98.
39. REINVENTING MEDICARE. THE GOVERNMENT READIES ITS NEW 'CHOICE' PLAN-BUT WILL SENIORS UNDERSTAND IT? Quinn, JB. *Newsweek* 132:88, 28 Sep '98.

40. TAX-PREFERRED MEDICAL SAVINGS ACCOUNTS COMBINED WITH HIGH-DEDUCTIBLE CATASTROPHIC HEALTH PLANS MAY BE UNFAIR TO SOME. AHCPR Res Activities 225:12, Apr '99.

REINVENTING GOVERNMENT

Since 1990, the management staff of the Parklawn Health Library has selected 10 journal articles per month on innovative management techniques to appear in each Bulletin. First entitled "Total Quality Management," this recurring bibliography was renamed "Reinventing Government" to reflect and support the Administration's efforts to create a government that works better and costs less.

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| <p>41. AGE OF AGILE MANUFACTURING PUTS QUALITY TO THE TEST. Christian, PH. <i>Qual Progress</i> 32:45-51, May '99.</p> <p>42. CAN SINGLE SOURCING WORK IN R&D? Osmond, R. <i>Qual Progress</i> 32:37-43, May '99.</p> <p>43. HOW QUICK RESPONSE MANUFACTURING TAKES THE WAIT OUT. Suri, R. <i>J Qual & Participation</i> 22:46-9, May-June '99.</p> <p>44. MEASURING SUCCESS IN A CHANGING ENVIRONMENT. Barchan, M. <i>Strategy & Leadership</i> 27:12-5, May-June '99.</p> <p>45. MINDSHIFT. Piturro, M. <i>Manag Rev</i> 88:46-51, May '99.</p> | <p>46. PERFORMANCE METRICS: THE NEW STRATEGIC DISCIPLINE. Frost, B. <i>Strategy & Leadership</i> 27:34-5, May-June '99.</p> <p>47. PROFITING FROM QUALITY IN THE SERVICE ARENA. <i>Qual Progress</i> 32:81-4, May '99.</p> <p>48. THE SMART TALK TRAP. Pfeffer, J. <i>Harv Bus Rev</i> 77:134-42, May-June '99.</p> <p>49. STEPS TO KEEPING CHANGE EFFORTS HEADING IN THE RIGHT DIRECTION. Bolman, LG. <i>J Qual & Participation</i> 22:7-11, May-June '99.</p> <p>50. TEAMS AT WORK. Joinson, C. <i>HR Magazine</i> 44:30-6, May '99.</p> |
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SCHOOL VIOLENCE

School violence involves acts of physical, sexual or psychological aggression that may or may not result in injury or death. These acts occur between students or between students and teachers. The literature indicates that approximately 270,000 guns and 600,000 knives are brought to U.S. schools daily. In addition, every hour 2000 students are physically attacked on school premises and 900 teachers are threatened. Research indicates that school violence not only affects the physical, emotional, and social well-being of students but it also prevents teachers from accomplishing their primary goal of educating their students. To combat this violence, public schools throughout the U.S. are developing educational programs to teach students how to manage conflict as well as implementing regulatory programs that place police officers on school premises. NIMH is currently working with other federal agencies to address the issue of reducing school violence.

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| <p>51. AN ALTERNATIVE SOLUTION TO SCHOOL VIOLENCE. Cooper, JL. <i>J Systemic Therapies</i> 17:12-22, Fall '98.</p> | <p>55. MORAL REASONING ABOUT SCHOOL VIOLENCE: INFORMATIONAL ASSUMPTIONS ABOUT HARM WITHIN SCHOOL SUBCONTEXTS. Astor, RA. <i>Educ Psychologist</i> 33:207-21, Fall '98.</p> |
| <p>52. THE DEADLY PROGRESSION: ANGER, RAGE, INSANITY, AND VIOLENCE IN OUR SCHOOLS AND WHAT WE COULD DO ABOUT IT. Nesbit, F. <i>North Carolina Med J</i> 59:370-1, Nov-Dec '98.</p> | <p>56. SCHOOL VIOLENCE: THE EFFECTIVENESS OF A SCHOOL RESOURCE OFFICER PROGRAM IN A SOUTHERN CITY. Johnson, IM. <i>J Criminal Justice</i> 27:173-92, Mar '99.</p> |
| <p>53. HOW TO TAKE A WEAPONS HISTORY: INTERVIEWING CHILDREN AT RISK FOR VIOLENCE AT SCHOOL. <i>J Am Acad Child Adolesc Psychiatry</i> 37:1100-2, Oct '98.</p> | <p>57. SCHOOL VIOLENCE: PREVALENCE AND INTERVENTION STRATEGIES FOR AT-RISK ADOLESCENTS. Cirillo, KJ. <i>Adolescence</i> 33:319-30, Sum '98.</p> |
| <p>54. THE JONESBORO SCHOOL SHOOTINGS: LESSONS FOR US ALL. Skaug, WA. <i>Pediatrics</i> 103:156, Jan '99.</p> | <p>58. SPECIALIST-LEVEL PREPARATION IN SCHOOL VIOLENCE AND YOUTH GANG INTERVENTION. Larson, J. <i>Psychol Sch</i> 35:373-9, Oct '98.</p> |

59. VICTIMIZATION, USE OF VIOLENCE, AND DRUG USE AT SCHOOL AMONG MALE ADOLESCENTS WHO ENGAGE IN SAME-SEX SEXUAL BEHAVIOR. DuRant, RH. *J Pediatr* 133:113-8, July '98.
60. VIOLENCE AT SCHOOL: RECENT EVIDENCE FROM FOUR NATIONAL SURVEYS. Kingery, PM. *Psychol Sch* 35:247-58, July '98.

SUBSTANCE ABUSE AND MOOD DISORDERS

Many drug abusers also suffer from mood disorders. The literature indicates that treating the mood disorder alone can often have positive effects on substance abuse treatment. While the links between mood disorders and substance abuse are complicated, treating the mood disorder first results in improvements in both conditions. Research indicates that lithium has proven effective in treating adult bipolar patients and that it may also be effective in treating adult comorbid substance dependence as well. NIDA is supporting research which studies the links between mood disorders and substance abuse in order to determine which therapies are most effective for these comorbid conditions.

61. ADOLESCENT DRUG USE AND ADULT DRUG PROBLEMS IN WOMEN: DIRECT, INTERACTIVE, AND MEDIATIONAL EFFECTS. Stacy, AW. *Exp Clin Psychopharmacol* 7:160-73, May '99.
62. BRAIN MAGNETIC RESONANCE IMAGING OF STRUCTURAL ABNORMALITIES IN BIPOLAR DISORDER. Strakowski, SM. *Arch Gen Psychiatry* 56:254-60, Mar '99.
63. COMPARING SUICIDE ATTEMPTERS, SUICIDE IDEATORS, AND NONSUICIDAL HOMELESS AND RUNAWAY ADOLESCENTS. Yoder, KA. *Suicide Life Threat Behav* 29:25-36, Spr '99.
64. DEPRESSIVE SYMPTOMS, DRUG NETWORK, AND THEIR SYNERGISTIC EFFECT ON NEEDLE-SHARING BEHAVIOR AMONG STREET INJECTION DRUG USERS. Mandell, W. *Am J Drug Alcohol Abuse* 25 (1):117-27, '99.

65. ORDER OF ONSET OF
SUBSTANCE ABUSE AND
DEPRESSION IN A SAMPLE OF
DEPRESSED OUTPATIENTS.
Abraham, HD. *Compr Psychiatry*
40:44-50, Jan-Feb '99.
66. PARALLELS TO EARLY ONSET
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USE AND DSM-IV DRUG AND
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FINDINGS FROM THE
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Hanna, EZ. *Alcohol Clin Exp Res*
23:513-22, Mar '99.
67. PREDICTORS OF
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SUBSTANCE ABUSE
TREATMENT PROGRAM.
Kingree, JB. *Am J Orthopsychiatry*
69:261-6, Apr '99.
68. PREGNANT ADOLESCENTS IN
CHEMICAL DEPENDENCY
TREATMENT. Farrow, JA. *J Subst
Abuse Treat* 16:157-61, Mar '99.
69. A RELAPSE PREVENTION GROUP
FOR PATIENTS WITH BIPOLAR
AND SUBSTANCE USE
DISORDER. Weiss, RD. *J Subst
Abuse Treat* 16:47-54, Jan '99.
70. SEX DIFFERENCES IN
MARIJUANA USE IN THE UNITED
STATES. Greenfield, SF. *Harv Rev
Psychiatry* 6:297-303, Mar-Apr '99.

SELECTED NEW ACQUISITIONS

To permit review of all books and reports in this list, they will not be circulated until three weeks from the date of this Bulletin. All materials are available for review on the NEW BOOKS display shelf near the Service Desk of the Library. You may reserve any book simply by completing the yellow strip form available on the display shelf.

DRUG ABUSE

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| SMA
99-3273 | DRIVING AFTER DRUG
OR ALCOHOL USE:
FINDINGS FROM THE
1996 NATIONAL
HOUSEHOLD SURVEY
ON DRUG ABUSE.
Rockville, MD, U.S. Dept. Of
Health and Human Services,
Substance Abuse and Mental
Health Services
Administration, 1998, 102 p. |
| HV
5824.W6
W6734 | LEARNING LIMITS:
COLLEGE WOMEN,
DRUGS, AND
RELATIONSHIPS.
Williams, Kimberly M.
Westport, CT, Bergin &
Garvey, 1998, 191 p. |

FINANCIAL MANAGEMENT

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| HV
741
I62 | INVESTING IN OUR
CHILDREN: WHAT WE
KNOW AND DON'T
KNOW ABOUT THE
COSTS AND BENEFITS OF
EARLY CHILDHOOD
INTERVENTIONS. Santa
Monica, CA, Rand, 1998,
159 p. |
| HG
179
R33927 | PROTECT YOUR
PARENTS AND THEIR
FINANCIAL HEALTH:
TALK WITH THEM
BEFORE IT'S TOO LATE.
Richards, Susan C. Chicago,
IL, Dearborn Financial, 1999,
248 p. |
| HC
106.82
M6873 | THE STATE OF WORKING
AMERICA, 1998-99.
Mishel, Lawrence R. Ithaca,
NY, ILS Press, 1999, 445 p. |

HEALTH PLANNING

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84AA1
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H3497</p> <p>W
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H3497</p> | <p>BLEEDING EDGE: THE BUSINESS OF HEALTH CARE IN THE NEW CENTURY. Kleinke, J.D. Gaithersburg, MD, Aspen Publishers, 1998, 362 p.</p> <p>BREAKING THE FINE RAIN OF DEATH: AFRICAN AMERICAN HEALTH ISSUES AND A WOMANIST ETHIC OF CARE. Townes, Emilie Maureen. New York, NY, Continuum, 1998, 214 p.</p> <p>EVIDENCE-BASED DECISIONMAKING FOR COMMUNITY HEALTH PROGRAMS. Jackson, Catherine A. Santa Monica, CA, Rand 1998, 85 p.</p> <p>HEALTH AND WELFARE FOR FAMILIES IN THE 21ST CENTURY. Sudbury, MA, Jones and Bartlett Publishers, 1999, 1 vol.</p> <p>HEALTH CARE OUTCOMES: COLLABORATIVE, PATH-BASED APPROACHES. Gaithersburg, MD, Aspen Publishers, 1998, 403 p.</p> | <p>WX
150
Z834</p> <p>W
44
P879</p> <p>WX
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400
M227</p> | <p>HEALTHCARE STRATEGIC PLANNING: APPROACHES FOR THE 21ST CENTURY. Chicago, IL, Health Administration Press, [1998], 122 p.</p> <p>LEGAL ASPECTS OF HEALTH CARE ADMINISTRATION. 7th ed. Pozgar, George D. Gaithersburg, MD, Aspen Publishers, 1999, 569 p.</p> <p>NO ONE WAS TURNED AWAY: THE ROLE OF PUBLIC HOSPITALS IN NEW YORK CITY SINCE 1900. New York, NY, Oxford University Press, 1999, 244 p.</p> <p>RACIAL AND ETHNIC DIFFERENCES IN HEALTH, 1996. Kass, Barbara L. Rockville, MD, Agency for Health Care Policy and Research, 1999, 26 p.</p> <p>SAFETY AND HEALTH IN CONFINED SPACES. McManus, Neil. Boca Raton, FL, Lewis Publishers, 1999, 901 p.</p> |
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84.1
C5556 SURVIVING MODERN
MEDICINE: HOW TO GET
THE BEST FROM
DOCTORS, FAMILY, AND
FRIENDS. Clarke, Peter.
New Brunswick, NJ, Rutgers
University Press, 1998, 308 p.

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WOOD JOHNSON
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110
T918 20 COMMON PROBLEMS
IN PRIMARY CARE. New
York, NY, McGraw-Hill,
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1999, 592 p.

HD
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B41 THE COMING SHAPE OF
ORGANIZATION. Belbin,
R.M. Woburn, MA,
Butterworth-Heinemann,
1998, 128 p.

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62.15
C995 MANAGING BY
MEASURING: HOW TO
IMPROVE YOUR
ORGANIZATION'S
PERFORMANCE
THROUGH EFFECTIVE
BENCHMARKING.
Czarnecki, Mark T. New
York, NY, AMACOM, 1999,
271 p.

HF
5718
B152 WRITING & SPEAKING
AT WORK: A PRACTICAL
GUIDE FOR BUSINESS
COMMUNICATION.
Bailey, Edward P. Upper
Saddle River, NJ, Prentice
Hall, 1999, 237 p.

MANAGEMENT

HF
5415.5
B4647 BEST PRACTICES IN
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New York, NY, AMACOM,
1999, 414 p.

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L5777 BREAKAWAY PLANNING:
8 BIG QUESTIONS TO
GUIDE OR-
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CHANGE. Levesque, Paul.
New York, NY, American
Management Association,
1998, 258 p.

MEDICAL & ALLIED SCIENCES

WA
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B275 CHEMICAL SENSITIVITY:
THE TRUTH ABOUT
ENVIRONMENTAL
ILLNESS. Barrett, Stephen.
Amherst, NY, Prometheus
Books, 1998, 212 p.

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| <p>WB
890
C7384</p> | <p>THE COMPLETE BOOK
OF SYMPTOMS &
TREATMENTS: YOUR
COMPREHENSIVE GUIDE
TO THE SAFETY AND
EFFECTIVENESS OF
ALTERNATIVE AND
COMPLEMENTARY
MEDICINE FOR COMMON
AILMENTS. Boston, MA,
Element, 1998, 953 p.</p> | <p>WK
150
Z44</p> | <p>LIVING LONGER IN
THE BOOMER AGE:
COMBINING
ALTERNATIVE AND
CONVENTIONAL
MEDICINE FOR
MAXIMUM HEALTH AND
VITALITY. Zenk, John L.
Hauppauge, NY, Advanced
Research Press, 1998, 160 p.</p> |
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890
C7381</p> | <p>COMPLEMENTARY/
ALTERNATIVE
MEDICINE: AN
EVIDENCE-BASED
APPROACH. St. Louis, MO,
Mosby, 1999, 442 p.</p> | <p>WB
537
L9483</p> | <p>MASSAGE THERAPY:
THEORY AND PRACTICE.
Loving, Jean E. Stamford,
CT, Appleton & Lange, 1999,
300 p.</p> |
| <p>QU
145
W6757</p> | <p>ESSENTIALS OF
NUTRITION AND DIET
THERAPY. 7th ed.
Williams, Sue Rodwell. St.
Louis, MO, Mosby, 1999,
729 p.</p> | <p>QZ
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M46833</p> | <p>MEDICAL GENETICS. 2nd
ed. St. Louis, MO, Mosby,
1999, 372 p.</p> |
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660
E84</p> | <p>THE ETHICS OF ORGAN
TRANSPLANTS: THE
CURRENT DEBATE.
Amherst, NY, Prometheus
Books, 1998, 350 p.</p> | <p>WL
140
N39853</p> | <p>NEUROLOGIC DISEASE
IN WOMEN. New York,
NY, Demos, 1998, 453 p.</p> |
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TRANSPLANTS: THE
CURRENT DEBATE.
Amherst, NY, Prometheus
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104
S897</p> | <p>NEUROPEPTIDES:
REGULATORS OF
PHYSIOLOGICAL
PROCESSES. Strand, Fleur
L. Cambridge, MA, MIT
Press, 1999, 658 p.</p> |
| <p>WB
102
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MEDICINE: A
FRAMEWORK FOR
CLINICAL PRACTICE.
Stamford, CT, Appleton &
Lange, 1998, 263 p.</p> | <p>QV
77
P8811</p> | <p>PRACTICAL MANAGE-
MENT OF THE SIDE
EFFECTS OF
PSYCHOTROPIC DRUGS.
New York, NY, M. Dekker,
1999, 311 p.</p> |

QV
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- List of acronyms
- References
- Subject index
- Contributor index

THE STATE OF AMERICA'S CHILDREN YEARBOOK. Children's Defense Fund. Washington, D.C., 1999. REF-GEN HV 741 S797

This yearbook contains current information on the state of children in the United States. The six main chapters include: Family Income; Child Health; Child Care, Education, Children and Families in Crisis; and Juvenile Justice and Youth Development. Each chapter contains statistics, background information and a 1999 agenda for action. In addition, there are several appendices which include:

- National trends among children
- Children in the states
- Selected web sites

PREVIOUS CURRENT TOPICS

Previous current topics can be obtained upon request

Topic	Bulletin No.	Date
Health Insurance Coverage and Children Adolescent Depression Binge Drinking Among College Students HIV and Mortality Masking Author Identity and Quality Peer Review Reinventing Government Telehealth	473	April 1999
Longevity and the Elderly Health Insurance Attention-Deficit Hyperactivity Disorder Health Insurance Implantable Cardioverter Defibrillator Use Longitudinal Studies of Mental Disorders Reinventing Government Rural Health Networks	474	May 1999
Bioterrorism Childhood Asthma Chiropractic Versus Medical Education Evidence Based Medicine in Managed Care Genetics and Drug Addiction Reinventing Government Women's Mental Health	475	June 1999

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- Administration for Children and Families
- Administration on Aging
- Agency for Health Care Policy and Research
- HHS Regional Offices
- Health Resources and Services Administration
- Indian Health Service
- National Center for Health Statistics
- National Institute of Mental Health
- National Institute on Drug Abuse
- Office of the Secretary
- Office of Public Health and Science
- Program Support Center
- Substance Abuse and Mental Health Services Administration

LIBRARY MISSION

The Parklawn Health Library, the NCHS Staff Research Library, and the Information Resources Center plan, develop, and administer a national research collection and innovative information programs in direct support of the Department of Health and Human Services.

LIBRARY COLLECTION

The Scope of the collection includes the delivery of health care, health administration, health policy, health services research, health promotion and disease prevention, computer sciences, management sciences, medical sociology, health statistics, international health, epidemiology, public health, mental health, psychiatry and neurology, and substance abuse.

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